

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D	21	9/19
O.I.P.E. CLASSIFIER		SC 583	10/1/00
FORMALITY REVIEW	2A	0105	3-5-01
RESPONSE FORMALITY REVIEW	11		

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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REQUEST AVAILABLE COPY